

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | J | 43 | 04/23/01 |
| O.I.P.E. CLASSIFIER | | 920 | 05/11/01 |
| FORMALITY REVIEW | MH | 825 | 06-12-01 |
| RESPONSE FORMALITY REVIEW | 04 | | 9/18/01 |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

5041920

6/13/01
 26/19/01